

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>(MR)</u> FIRST <u>LARRY</u> MI <u>E.</u> NICKNAME LAST SUFFIX <u>ROMERO</u>	<b>OFFICE USE ONLY</b> Date Received <u>2013 APR 11 PM 2:13</u> Date Hand-delivered or Postmarked Receipt # <u>Amount</u> Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <u>2530 SAVANNAH</u> <u>EL PASO, TX 79930</u>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(915) 740-7555</u>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <u>(MR)</u> FIRST <u>HORTENCIA</u> MI <u>B.</u> NICKNAME LAST SUFFIX <u>ROMERO</u>		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>3230 MONTANA AVE</u> <u>EL PASO, TX 79903</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(915) 562-3226</u>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year <u>01 / 01 / 2013</u> THROUGH Month Day Year <u>04 / 01 / 2013</u>		
11 ELECTION	ELECTION DATE Month Day Year <u>05 / 11 / 2013</u> ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <u>CITY REPRESENTATIVE</u> <u>DISTRICT 2</u>	

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# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

LARRY E. ROMERO

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

CITY CLERK DEPT  
2013 APR 11 PM 2:13

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 26,066.43

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 8130.95

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

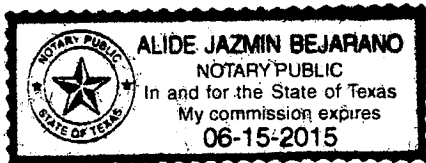
\$ 110.00

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*Larry E. Romero*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Larry E. Romero, this the 11th day of April, 20 13, to certify which, witness my hand and seal of office.

Signature of officer administering oath

ALIDE JAZMIN BEJARANO

Printed name of officer administering oath

Notary Public

Title of officer administering oath

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

1/07/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

CARL ATTEBERRY

6 Contributor address; City; State; Zip Code

4605 BLOSSOM  
EL PASO, TX 799247 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

INSURANCE AGENT

10 Employer (See Instructions)

Date

1/10/13

Full name of contributor

☐ out-of-state PAC (ID#)

KATHY WALSH

Contributor address; City; State; Zip Code

2510 WEDGELY DR.  
DALLAS, TX 75211Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

NON-PROFIT EXEC.

Employer (See Instructions)

Date

1/10/13

Full name of contributor

☐ out-of-state PAC (ID#)

SOLEDAD BASOCO

Contributor address; City; State; Zip Code

10560 JETROCK  
EL PASO, TX 79935Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

INSURANCE EXECUTIVE

Employer (See Instructions)

Date

1/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

JIM + DIANA ERICKSON

Contributor address; City; State; Zip Code

2501 NASHVILLE  
EL PASO, TX 79930Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

SILVIA WOLLIN

Contributor address; City; State; Zip Code

2309 GRANT AVE.  
EL PASO, TX 79930Amount of  
contribution (\$)

\$40.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

## **SCHEDULE A**

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

1/17/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

BARBARA LEWIS

6 Contributor address; City; State; Zip Code

6216 CAMINO ALEGRE  
EL PASO, TX 799127 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

CHARLES GABRIEL

Contributor address; City; State; Zip Code

928 CORTINO DR.  
EL PASO, TX 79912Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

TOMAS CARDENAS

Contributor address; City; State; Zip Code

5901 POMONA CT.  
EL PASO, TX 79912Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

ROBERT NILAND

Contributor address; City; State; Zip Code

4800 N. STANTON #155  
EL PASO, TX 79902Amount of  
contribution (\$)

\$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

RICHARD BARAJAS

Contributor address; City; State; Zip Code

7140 MAJORCA  
EL PASO, TX 79912Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

## SCHEDULE A

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1 Total pages Schedule A:

14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

1/17/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

RONNIE HERNANDEZ

7 Amount of contribution (\$)

\$50.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

2816 MOUNTAIN  
EL PASO, TX 79930

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

HENRY CASTILLO

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1848 TOM BOLT  
EL PASO, TX 79936

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

WILLIE MARTINEZ

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

3305 RUNNING DEER  
EL PASO, TX 79936

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

PAUL PEREZ

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

11528 JAMES GRANT  
EL PASO, TX 79936

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

GREG AND SUSAN DAW

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4790 SOL DEL ALMA WAY  
EL PASO, TX 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

2013 APR 11 PM 2:13

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

1/20/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

MICHAEL MILES

6 Contributor address; City; State; Zip Code

828 SINGING HILLS  
EL PASO, TX 799127 Amount of  
contribution (\$)

\$500.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/22/13

Full name of contributor

☐ out-of-state PAC (ID#)

SANDY INGUANZO

Contributor address; City; State; Zip Code

3137 LONESOME DOVE  
EL PASO, TX 79936Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/13

Full name of contributor

☐ out-of-state PAC (ID#)

MILTON DURAN

Contributor address; City; State; Zip Code

10205 ASHWOOD  
EL PASO, TX 79925Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/25/13

Full name of contributor

☐ out-of-state PAC (ID#)

VICTOR ARIAS JR.

Contributor address; City; State; Zip Code

2101 CEDAR SPRINGS STE. 1450  
DALLAS, TX 75201Amount of  
contribution (\$)

\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/28/13

Full name of contributor

☐ out-of-state PAC (ID#)

LEO + FRANCES DURAN

Contributor address; City; State; Zip Code

721 WELLESLEY  
EL PASO, TX 79902Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

## **SCHEDULE A**

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

1/31/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

CARLOS AGUILAR

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

3414 MONTANA  
EL PASO, TX 79903

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/4/13

Full name of contributor

☐ out-of-state PAC (ID#)

FERNANDO BARRUETA

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1800 OLD MEADOW RD. #522  
MCLEAN, VA 22102

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/14/13

Full name of contributor

☐ out-of-state PAC (ID#)

ALICIA HERNANDEZ

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

801 ELLIS  
EL PASO, TX 79903

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/26/13

Full name of contributor

☐ out-of-state PAC (ID#)

JOE GUTIERREZ

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5607 BAGDAD WAY  
EL PASO, TX 79924

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/26/13

Full name of contributor

☐ out-of-state PAC (ID#)

DAVID AUSTIN

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5745 MIRA GRANDE  
EL PASO, TX 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

2/28/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

WILLIAM LEFF

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

3130 MONTANA  
EL PASO, TX 79903

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/28/13

Full name of contributor

☐ out-of-state PAC (ID#)

STAN HARMON

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2400 MEMPHIS  
EL PASO, TX 79930

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/28/13

Full name of contributor

☐ out-of-state PAC (ID#)

ED FLORES

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

296 AMELIA  
EL PASO, TX 79915

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/6/13

Full name of contributor

☐ out-of-state PAC (ID#)

STEVE WALSH

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2510 WEDGELY DR.  
DALLAS, TX 75211

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/13

Full name of contributor

☐ out-of-state PAC (ID#)

MYRNA DECKERT

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4276 CANTERBURY  
EL PASO, TX 79902

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

SCHEDULE A

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/12/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

ROBERT HOY JR.

7 Amount of contribution (\$)

\$1,000.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

201 VILLA SERENA CT.  
EL PASO, TX 79912

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/12/13

Full name of contributor

☐ out-of-state PAC (ID#)

GINGER FRANCIS

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

P.O. Box 3739  
EL PASO, TX 79902

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/13

Full name of contributor

☐ out-of-state PAC (ID#)

L. FREDERICK FRANCIS

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

500 N. ~~FRANCIS~~ MESA  
EL PASO, TX 79901

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/13

Full name of contributor

☐ out-of-state PAC (ID#)

WILLIAM SANDERS

Amount of contribution (\$)

\$2,000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

201 E. MAIN  
EL PASO, TX 79901

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/13/13

Full name of contributor

☐ out-of-state PAC (ID#)

STEVEN HOY

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

700 CINCINNATI  
EL PASO, TX 79902

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

SCHEDULE A

2013 APR 11 PM 2:13

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1 Total pages Schedule A: 14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/13/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

STEVE FOX

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

\$1,000<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

6 Contributor address; City; State; Zip Code

1122 AIRWAY BLVD.  
EL PASO, TX 79925

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/14/13

Full name of contributor

☐ out-of-state PAC (ID#)

JOSE LUIS ENRIQUEZ

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$100<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

1713 TOMMY AARON  
EL PASO, TX 79935

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/14/13

Full name of contributor

☐ out-of-state PAC (ID#)

MICHAEL HERNANDEZ

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$200<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

4501 TROWBRIDGE  
EL PASO, TX 79903

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/14/13

Full name of contributor

☐ out-of-state PAC (ID#)

PEDRO LUZARRAGA

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$50<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

1717 CHALLENGER  
EL PASO, TX 79936

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/14/13

Full name of contributor

☐ out-of-state PAC (ID#)

DAVID ELLIS

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$50<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

4115 TROWBRIDGE  
EL PASO, TX 79903

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SURETY CLERK DEPT.

## SCHEDULE A

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/14/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

ROBERT BROWN

7 Amount of contribution (\$)

\$2,000.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

123 W. MILLS  
EL PASO, TX 79901

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/14/13

Full name of contributor

☐ out-of-state PAC (ID#)

J. KIRK ROBISON

Amount of contribution (\$)

\$2,000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4445 N. MESA  
EL PASO, TX 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/15/13

Full name of contributor

☐ out-of-state PAC (ID#)

CECILIA ROMERO

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

3324 WAYSIDE  
EL PASO, TX 79935

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/16/13

Full name of contributor

☐ out-of-state PAC (ID#)

DIANA PEREZ

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

9947 FALKIRK AVE.  
EL PASO, TX 79925

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/19/13

Full name of contributor

☐ out-of-state PAC (ID#)

JACK CARDWELL

Amount of contribution (\$)

\$2,000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

6080 SURETY DR.  
EL PASO, TX 79905

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT. SCHEDULE A

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/19/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

RAYMOND PALACIOS

7 Amount of contribution (\$)

\$500<sup>00</sup>

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

637 WILLOW GLEN  
EL PASO, TX 79922

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/20/13

Full name of contributor

☐ out-of-state PAC (ID#)

PAUL POWERS

Amount of contribution (\$)

\$250<sup>00</sup>

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

230 OLEANDER WAY  
EL PASO, TX 79922

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/13

Full name of contributor

☐ out-of-state PAC (ID#)

JOAN Mc LAUGHLIN

Amount of contribution (\$)

\$250<sup>00</sup>

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4610 FRANKFORT  
EL PASO, TX

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/13

Full name of contributor

☐ out-of-state PAC (ID#)

WILLIAM LOVELADY

Amount of contribution (\$)

\$300<sup>00</sup>

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

P.O. BOX 51  
TORNILLO, TX 79853

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/21/13

Full name of contributor

☐ out-of-state PAC (ID#)

CARL ATTEBERRY

Amount of contribution (\$)

\$100<sup>00</sup>

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4605 BLOSSOM  
EL PASO, TX 79924

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/22/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

ROBERTO DIAZ DE LEON

7 Amount of  
contribution (\$)\$100<sup>00</sup>8 In-kind contribution  
description (if applicable)

6 Contributor address; City; State; Zip Code

425 DESERT GARDEN DR.  
SANTA TERESA, NM 88008

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/22/13

Full name of contributor

☐ out-of-state PAC (ID#)

MILTON DURAN

Amount of  
contribution (\$)\$50<sup>00</sup>In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

10205 ASHWOOD  
EL PASO, TX 79925

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/22/13

Full name of contributor

☐ out-of-state PAC (ID#)

IRENE FIERRO

Amount of  
contribution (\$)\$100<sup>00</sup>In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

2618 FILLMORE  
EL PASO, TX 79930

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/25/13

Full name of contributor

☐ out-of-state PAC (ID#)

J.O. STEWART

Amount of  
contribution (\$)\$500<sup>00</sup>In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

124 W. CASTELLANO  
EL PASO, TX 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/25/13

Full name of contributor

☐ out-of-state PAC (ID#)

RACHEL MONTES

Amount of  
contribution (\$)\$100<sup>00</sup>In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

1713 HENRY ABBOTT  
EL PASO, TX 79936

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

2013 APR 11 PM 2:13

**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/26/13

5 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

RICHARD CASTRO

7 Amount of  
contribution (\$)\$1,000<sup>00</sup>8 In-kind contribution  
description (if applicable)

6 Contributor address; City; State; Zip Code

3332 WEDGEWOOD  
EL PASO, TX 79925

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/26/13

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

IRA BARBE

Amount of  
contribution (\$)\$25<sup>00</sup>In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

2901 MCKINLEY  
EL PASO, TX 79930

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/27/13

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

RICHARD AGUILAR

Amount of  
contribution (\$)\$500<sup>00</sup>In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

8201 LOCKHEED  
EL PASO, TX 79925

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/29/13

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

ROBERT WINGO

Amount of  
contribution (\$)\$500<sup>00</sup>In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

1021 LOS SARDINES  
EL PASO, TX 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/8/13

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

TANNY BERG

Amount of  
contribution (\$)\$1,950<sup>00</sup>In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

P.O. BOX 96  
EL PASO, TX 79912

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT. **SCHEDULE A**

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

1/17/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

RUBEN ESCANDON

6 Contributor address; City; State; Zip Code

4121 ADELITA  
EL PASO, TX 799227 Amount of  
contribution (\$)

\$15000

8 In-kind contribution  
description (if applicable)AUDIO SYSTEM FOR  
KICK-OFF EVENT

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/15/13

Full name of contributor

☐ out-of-state PAC (ID#)

JOHN ROMERO

Contributor address; City; State; Zip Code

1121 LARRY MAHAN  
EL PASO, TX 79925Amount of  
contribution (\$)

\$28164

In-kind contribution  
description (if applicable)ADVERTISING  
BANNERS

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/14/13

Full name of contributor

☐ out-of-state PAC (ID#)

RUBEN ESCANDON

Contributor address; City; State; Zip Code

4121 LA ADELITA  
EL PASO, TX 79922Amount of  
contribution (\$)

\$15000

In-kind contribution  
description (if applicable)AUDIO SYSTEM FOR  
FUNDRAISER

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/16/13

Full name of contributor

☐ out-of-state PAC (ID#)

JOHN ROMERO

Contributor address; City; State; Zip Code

1121 LARRY MAHAN  
EL PASO, TX 79925Amount of  
contribution (\$)

\$44062

In-kind contribution  
description (if applicable)T-SHIRTS  
FOR VOLUNTEERS

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/13

Full name of contributor

☐ out-of-state PAC (ID#)

MELISSA ROMERO

Contributor address; City; State; Zip Code

2726 SILVER  
EL PASO, TX 79930Amount of  
contribution (\$)

\$4500

In-kind contribution  
description (if applicable)REGISTRATION FEE  
FOR NORTHEASTER  
PARADE

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT. SCHEDULE A

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

LARRY E. ROMERO

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/25/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

JOHN ROMERO

7 Amount of contribution (\$)

#484.17

8 In-kind contribution description (if applicable)

BANNER FOR  
NORTHEASTER  
PARADE

6 Contributor address; City; State; Zip Code

1121 LARRY MAHAN  
EL PASO, TX 79925

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/14/13

Full name of contributor

☐ out-of-state PAC (ID#)

GARY HOFF

Amount of contribution (\$)

#7500

In-kind contribution description (if applicable)

FOOD FOR  
FUNDRAISER

Contributor address; City; State; Zip Code

1216 TEXAS  
EL PASO, TX 79901

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



2013 APR 11 PM 2:13

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

CITY CLERK DEPT.

**LOANS**

2013 APR 11 PM 2:13

**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E:	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS:    ⇒    ⇒    ⇒    ⇒    ⇒    ⇒    \$			
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)		9 Loan Amount (\$)
6 Is lender a financial Institution?  Y    N	8 Lender address;    City;    State;    Zip Code		10 Interest rate
			11 Maturity date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of Collateral <input type="checkbox"/> none		15 Check if personal funds were deposited into political account <input type="checkbox"/>	
16 GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address;    City;    State;    Zip Code		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)		Loan Amount (\$)
Is lender a financial Institution?  Y    N	Lender address;    City;    State;    Zip Code		Interest rate
			Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account <input type="checkbox"/>	
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address;    City;    State;    Zip Code		
Principal Occupation (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

2013 APR 11 PM 2:13

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>2</b>		2 FILER NAME <b>LARRY E. ROMERO</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>1/28/13</b>		5 Payee name <b>UNIVERSAL GRAPHICS</b>			
6 Amount (\$) <b>\$16643</b>		7 Payee address; City; State; Zip Code <b>1217 BARRANCA #B EL PASO, TX 79935</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>POSTERS + ENVELOPES</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>1/30/13</b>		Payee name <b>CITY OF EL PASO</b>			
Amount (\$) <b>\$25000</b>		Payee address; City; State; Zip Code <b>2 CIVIC CENTER PLAZA EL PASO, TX 79901</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>FEES</b>		Description (If travel outside of Texas, complete Schedule T) <b>FILING FEE</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>2/1/13</b>		Payee name <b>UNIVERSAL GRAPHICS</b>			
Amount (\$) <b>\$48713</b>		Payee address; City; State; Zip Code <b>1217 BARRANCA #B EL PASO, TX 79935</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>PRINTING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T) <b>PUSH CARDS</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>2/6/13</b>		Payee name <b>EP SHALOM</b>			
Amount (\$) <b>\$1,95000</b>		Payee address; City; State; Zip Code <b>444 EXECUTIVE CENTER BLVD. #120 EL PASO, TX 79902</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

2013 APR 11 PM 2:13

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>2</b>		2 FILER NAME <b>LARRY E. ROMERO</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>2/8/13</b>		5 Payee name <b>ROMERO CONSULTING</b>			
6 Amount (\$) <b>\$70815</b>		7 Payee address; City; State; Zip Code <b>1121 LARRY MAHAN EL PASO, TX 79925</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>LIABILITY INSURANCE FOR OFFICE</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/12/13</b>		Payee name <b>DAVID'S PENNANTS BANNERS</b>			
Amount (\$) <b>\$48713</b>		Payee address; City; State; Zip Code <b>9911 CARNEGIE EL PASO, TX 79925</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T) <b>BANNERS FOR OFFICE</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/13/13</b>		Payee name <b>DAVID'S PENNANTS BANNERS</b>			
Amount (\$) <b>\$57508</b>		Payee address; City; State; Zip Code <b>9911 CARNEGIE EL PASO, TX 79925</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T) <b>CORRUGATED SIGNS</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/22/13</b>		Payee name <b>DAVID'S PENNANTS BANNERS</b>			
Amount (\$) <b>\$56831</b>		Payee address; City; State; Zip Code <b>9911 CARNEGIE EL PASO, TX 79925</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T) <b>CORRUGATED SIGNS</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS** CITY CLERK DEPT.

## **SCHEDULE G**

2013 APR 11 PM 2:13

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <b>2</b>		2 FILER NAME <b>LARRY E. ROMERO</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>1/22/13</b>		5 Payee name <b>CATHEDRAL HIGH SCHOOL</b>			
6 Amount (\$) <b>\$100.00</b> <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code <b>1309 N. STANTON EL PASO, TX 79902</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>EVENT EXPENSES</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>HALL RENTAL</b>	
Date <b>1/23/13</b>		Payee name <b>EL PASO COUNTY ELECTIONS DEPT.</b>			
Amount (\$) <b>\$25.00</b> <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>500 E. SAN ANTONIO EL PASO, TX 79901</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>FEES</b>		Description (If travel outside of Texas, complete Schedule T) <b>MAP OF DISTRICT 2</b>	
Date <b>1/24/13</b>		Payee name <b>OFFICE DEPOT</b>			
Amount (\$) <b>\$102.78</b> <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>1111 GERONIMO DRIVE EL PASO, TX 79925</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>		Description (If travel outside of Texas, complete Schedule T) <b>EASELS, FOAM BOARD</b>	
Date <b>3/08/13</b>		Payee name <b>LOWE'S</b>			
Amount (\$) <b>\$140.03</b> <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>11950 ROJAS EL PASO, TX 79936</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T) <b>CABLE TIES FOR SIGNS WOODEN STAKES FOR SIGNS</b>	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

CITY CLERK DEPT.

SCHEDULE G

2013 APR 11 PM 2:13

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <b>2</b>		2 FILER NAME <b>LARRY E. ROMERO</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/16/13</b>		5 Payee name <b>OFFICE DEPOT</b>			
6 Amount (\$) <b>\$48.70</b> <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code <b>1111 GERONIMO EL PASO, TX 79925</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>LABELS - NOTE PADS</b>	
Date <b>3/21/13</b>		Payee name <b>OFFICE DEPOT</b>			
Amount (\$) <b>\$86.58</b> <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>1111 GERONIMO EL PASO, TX 79925</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>		Description (If travel outside of Texas, complete Schedule T) <b>LABELS</b>	
Date <b>2/28/13</b>		Payee name <b>DAVID'S PENNANTS BANNERS</b>			
Amount (\$) <b>\$2435.63</b> <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code <b>9911 CARNEGIE AVE. EL PASO, TX 79925</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T) <b>200 CORRUGATED SIGNS</b>	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
<input type="checkbox"/> Reimbursement from political contributions intended					
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# **PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH**

CITY CLERK DEPT.

SCHEDULE H

2013 APR 11 PM 2:13

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

CITY CLERK DEPT.

SCHEDULE I

2013 APR 11 PM 2:13

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)

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**INTEREST EARNED, OTHER CREDITS/GAINS/  
REFUNDS, AND PURCHASE OF INVESTMENTS****CLERK DEPT. SCHEDULE K**

2013 APR 11 PM 2:13

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

8 Amount  
(\$)

6 Address of person from whom amount is received; City; State; Zip Code

7 Purpose for which amount is received

Date

Name of person from whom amount is received

Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Date

Name of person from whom amount is received

Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Date

Name of person from whom amount is received

Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

CITY CLERK DEPT.

SCHEDULE T

The Instruction Guide explains how to complete this form.

2013 APR 11 PM 2:13  
1 Total pages Schedule T:

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

5 Contribution / Expenditure reported on:

☐ Schedule A   ☐ Schedule B   ☐ Schedule C   ☐ Schedule D   ☐ Schedule F   ☐ Schedule G  
☐ Schedule H   ☐ Schedule N   ☐ COH-UC   ☐ COH-T   ☐ PAC-C   ☐ PAC-E

6 Dates of travel

7 Name of person(s) traveling

8 Departure city or name of departure location

9 Destination city or name of destination location

10 Means of transportation

11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

☐ Schedule A   ☐ Schedule B   ☐ Schedule C   ☐ Schedule D   ☐ Schedule F   ☐ Schedule G  
☐ Schedule H   ☐ Schedule N   ☐ COH-UC   ☐ COH-T   ☐ PAC-C   ☐ PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

☐ Schedule A   ☐ Schedule B   ☐ Schedule C   ☐ Schedule D   ☐ Schedule F   ☐ Schedule G  
☐ Schedule H   ☐ Schedule N   ☐ COH-UC   ☐ COH-T   ☐ PAC-C   ☐ PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

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